

**Fulton County
FY 2015/2016/2017 CDBG Application**

**PUBLIC SERVICE AND ECONOMIC DEVELOPMENT
APPLICATION**

(FOR PUBLIC SERVICE OPERATING COSTS INCLUDING ELIGIBLE LABOR,
SUPPLIES, MATERIALS, OVERHEAD, AND MAINTENANCE REQUIRED TO
PROVIDE A QUANTIFIABLE INCREASE IN THE LEVEL OF EXISTING SERVICES
OR MAINTAIN THE CURRENT LEVEL OF SERVICE. FOR ECONOMIC
DEVELOPMENT ACTIVITIES INCLUDING BUSINESS IMPROVEMENT LOANS,
CAPITAL FINANCING AND TECHNICAL ASSISTANCE TO EXISTING AND
DEVELOPING SMALL BUSINESSES AND MICROENTERPRISES.)

This page must be used as the cover page for your application. You may retype the page. Applications must be submitted in the outline form presented in order to be considered for funding.

Applicant Information

Organization's Legal Name: _____

Street Address/City/State/Zip: _____

Executive Director: _____

Designated Contact Person/Title: _____

Telephone: _____

Fax: _____

E-Mail: _____

Project Information

Amount of CDBG Funding Requested:

*Applicant must obtain gap financing of 50% or
more per each project/activity year.*

FY 2015 \$ _____

FY 2016 \$ _____

FY 2017 \$ _____

Proposed Project Name: _____

Proposed Project Street Address, City, Zip Code: _____

Fulton County FY 2015/2016/2017
CDBG Public Service and Economic Development

Section I: Project Description

Please provide a narrative description of no more than two (2) pages (12 inch font size on 8½” x 11” paper) for the proposed project. Your narrative must include *but is not limited to* the following information:

1. What is the goal of this project?
2. What target population will be served by this project (specify youth, seniors, special needs, etc.)?
3. What objective documentation or research justifies the need for this project in Fulton County?
4. How does your project fit into a continuum of care for your target population?
5. Provide an implementation schedule detailing the major components of the project or program, the timing of each component and the projected drawdown dates. This information must be included as Attachment E to your application (see page 15). The County will award funding from each program year based on the ability of applicants to expend funds within each program fiscal year, which runs from January 1st thru December 31st of each year.
6. How does the project relate to your other submissions for this funding cycle, if any?
7. Describe the anticipated project outcomes. Complete the chart on the following page to describe the most significant outcome(s) this project is expected to have on its participants for year(s) 2015/2016/2017. Tell how many households or individuals will realize each outcome and how each outcome will be measured. Copy and complete the following chart, as needed, for each program year of your application.

Definitions:

Outcomes: *Outcomes are not the products for the agency, but the benefits for the participants. What will be the benefits for the client? Why is the project being done? Examples of outcomes include the # of seniors remaining in their homes, # of evictions prevented, finding and maintaining a job or permanent housing, or having financial stability. Include only major project outcomes supported by the requested CDBG funds.*

Major Tasks: *Outline the major tasks/activities to be conducted by this project (e.g. client outreach/assessment; job training/placement; site preparation, pre-development, management, construction/rehabilitation; etc.)*

Outputs: *Quantifiable products of tasks, e.g. # housing units constructed/rehabilitated, # of people housed, # of jobs created or persons trained, # of homeless sheltered, etc.*

Outcome #1 *Describe how participants will benefit and how many are expected to realize this outcome.*

Major Tasks Necessary to Realize Outcomes	Outputs Resulting from Tasks
Outcome Measurements: <i>Describe evaluation tools, methods and benchmarks to measure achievement of this outcome.</i>	

Outcome #2 *Describe how participants will benefit and how many are expected to realize this outcome.*

Major Tasks Necessary to Realize Outcomes	Outputs Resulting from Tasks
Outcome Measurements: <i>Describe evaluation tools, methods and benchmarks to measure achievement of this outcome.</i>	

Section II: National Objective/Low- and Moderate-Income Benefit.

Projects that provide a benefit to low- and moderate-income people can qualify as follows:

1. Area Benefit; or
2. Limited Clientele/Job Creation.

Refer to Section II of the accompanying Program Manual to determine which category best fits your project. Complete one section, *either A or B*, below. Data needed to complete Area Benefit questions may be found on page ix or in Appendix B of the Program Manual.

A. Area Benefit Project:

1. Indicate the Census tract(s) and Block Group(s) in which the service area for your project/service is located? _____
2. How many residents live in this service area? _____
3. What is the percentage of low- and moderate-income beneficiaries in the service area? _____
4. What documentation did you use to determine your answer to the above questions?
Census Data _____ Resident Surveys _____

If a survey was used, please attach completed surveys. The sample survey form is included on page ix.

5. List the anticipated characteristics of all beneficiaries who will be served:

	# to be Served	# Hispanic
White	_____	_____
Black/African American	_____	_____
Asian	_____	_____
American Indian/Alaskan Native	_____	_____
Native Hawaiian/Other Pacific Islander	_____	_____
American Indian/Alaskan Native & White	_____	_____
Asian & White	_____	_____
Black/African American & White	_____	_____
Am. Indian/Alaskan Native & Black/African Am.	_____	_____
Other Multi-Racial	_____	_____

B. Limited Clientele/Job Creation Projects:

1. What is the annual unduplicated # of people to be served by the proposed project?

2. Does the project primarily benefit a specialized population(s) such as:

Elderly (62 or older) ___ Disabled ___ HIV/AIDS ___
 Homeless ___ Illiterate Adults ___ Abused Children ___ Battered Spouses ___

Describe how this project assists this population:

3. Does the proposed project serve Individuals (job training, drug counseling, etc.) or Households (housing rehabilitation, housing counseling, down payment assistance, etc.)?
4. What are the anticipated incomes of the beneficiaries? Refer to page viii for income limits. Report either by individual or household based on the answer to question #3 above.
- # at 0 – 30% of median income ___
 # at 31% - 50% of median income ___
 # at 51% - 80% of median income ___
5. Based upon the information provided above, what is the anticipated percent of low- and moderate-income beneficiaries? ____%
6. What percentage of low- and moderate-income beneficiaries is anticipated to be female single-head of households with children? ____%
7. List the anticipated characteristics of all beneficiaries who will be served:

	# to be Served	# Hispanic
White	_____	_____
Black/African American	_____	_____
Asian	_____	_____
American Indian/Alaskan Native	_____	_____
Native Hawaiian/Other Pacific Islander	_____	_____
American Indian/Alaskan Native & White	_____	_____
Asian & White	_____	_____
Black/African American & White	_____	_____
Am. Indian/Alaskan Native & Black/African Am.	_____	_____
Other Multi-Racial	_____	_____

Section III: Project Development – Public Service and Economic Development

This section is designed to help the County determine the readiness of the proposed project.

1. What services does the agency provide?
2. Will funds requested in this application be applied to general agency overhead or directed to a specific program within the agency.

Based on the answer to #2 above, answer the following questions as they relate to either the agency as a whole or the specific program for which funds are being requested.

- | | Yes | No |
|---|-----------------|-------|
| 3. Is the program a continuation of a current activity?
If so, explain how CDBG funds are necessary to maintain your current level of service. | _____ | _____ |
| 4. Is the program an expansion of a current activity?
If yes, describe the quantifiable increase in service that will result from a CDBG award. | _____ | _____ |
| 5. Has the agency received CDBG funding previously to operate this program/service? | _____ | _____ |
| If yes, what year(s) and how much? | | |
| <u>Year</u> | <u>\$ Award</u> | |
| _____ | _____ | |
| _____ | _____ | |
| _____ | _____ | |
| _____ | _____ | |
| 6. If this program/service is not currently in operation, does the agency have the staff to implement the service? | _____ | _____ |
| 7. Does the agency have office/facility space to accommodate the proposed program/service? | _____ | _____ |
| 8. What is the proposed start date of this program? | _____ | _____ |
| 9. Please explain how the agency identifies clients for this program/service and the process for documenting eligibility. | | |
| 10. What is the current zoning of the facility location? | | |
| 11. Is the facility in which the proposed program/service is provided consistent with current zoning?
If yes, explain the existing current zoning. | | |
| 12. Other information the agency wishes to provide regarding the status of the project. | | |

If the proposed project is an Economic Development Project, please continue and answer the following question:

13. What size businesses will be served?

- ☐ ONLY businesses with one to five employees, including the owner (microenterprises).
- ☐ Businesses with five or more employees (small businesses).

Section IV: Environmental and Historical Preservation Considerations

1. Please check the items below that, to the best of the agency's knowledge, apply to the proposed project.

The project:

- ___ is located within 15 miles of an airport.
- ___ is located within 100 to 3,000 feet of a railroad or public transportation track.
- ___ is located on a State or County road. Name the road _____
- ___ requires rezoning or a special permit.
- ___ structure was constructed prior to 1978.
- ___ structure is located on a heavily traveled street within 1,000 feet from the centerline or median.

- 2. Please indicate the year that the structure to be acquired/rehabilitated was constructed and identify the source of the information.
- 3. What is the current use of the property where the proposed project will be located?
- 4. What was the previous use of the property where the proposed project will be located?

Section V: Budget

Please complete the project budgets for the year 2015, 2016, and 2017 requests. Consider potential cost increases in the preparation of the budgets, particularly for FY 2016, and 2017. **Applicant must obtain gap financing of 50% or more per each project/activity year.**

A. FY 2015 Budget

List all Line Items Included in the Project Budget	A. Fulton County CDBG Funds Requested from FY 2015	B. Other Source(s) of Project Funding	C. Total (A + B)
Staff Salaries			
Staff Fringe Benefits			
Staff Travel			
Communications			
Rent/Lease			
Materials/Supplies			
Utilities			
Insurance/Bonding*			
Contractual Services			
Audit**			
Others (<i>list</i>):			
GRAND TOTAL			

* Note that General Liability Insurance (\$1 million); Automobile Liability Insurance, if appropriate; and Fidelity Bond (100% of contract amount) are usually required for all contractors. Costs for coverage should be included in this budget summary. If the agency does not already have this coverage, this is an eligible CDBG expense.

** All projects funded with CDBG funds must have an annual independent audit. Agencies with total annual federal or federally-derived funding of \$300,000 or more must have an annual A-133 audit. The cost of conducting this audit is an eligible CDBG expense.

1. Include commitment letters specifically for this project from other funding sources as Attachment D (refer to page 15). If there are not sufficient funding commitments to ensure completion of the project the application may not be funded.
2. Please describe the basis for the estimated budget (committed funds, past year fund raising success, etc.)

- Based on the budget above, what is the cost per beneficiary for the project? (Refer to your answer to Section II, B (1) of this application for the anticipated number of beneficiaries, and explain how the cost per beneficiary was calculated.)

B. FY 2016 Budget

List all Line Items Included in the Project Budget	A. Fulton County CDBG Funds Requested from FY 2016	B. Other Source(s) of Project Funding	C. Total (A + B)
Staff Salaries			
Staff Fringe Benefits			
Staff Travel			
Communications			
Rent/Lease			
Materials/Supplies			
Utilities			
Insurance/Bonding*			
Contractual Services			
Audit**			
Others (<i>list</i>):			
GRAND TOTAL			

* Note that General Liability Insurance (\$1 million); Automobile Liability Insurance, if appropriate; and Fidelity Bond (100% of contract amount) are usually required for all contractors. Costs for coverage should be included in this budget summary. If the agency does not already have this coverage, this is an eligible CDBG expense.

** All projects funded with CDBG funds must have an annual independent audit. Agencies with total annual federal or federally-derived funding of \$300,000 or more must have an annual A-133 audit. The cost of conducting this audit is an eligible CDBG expense.

- Include commitment letters specifically for this project from other funding sources as Attachment D (refer to page 15). If there are not sufficient funding commitments to ensure completion of the project the application may not be funded.
- Please describe the basis for the estimated budget (committed funds, past year fund raising success, etc.)

- Based on the budget above, what is the cost per beneficiary for the project? (Refer to your answer to Section II, B (1) of this application for the anticipated number of beneficiaries, and explain how the cost per beneficiary was calculated.)

C. FY 2017 Budget

List all Line Items Included in the Project Budget	A. Fulton County CDBG Funds Requested from FY 2017	B. Other Source(s) of Project Funding	C. Total (A + B)
Staff Salaries			
Staff Fringe Benefits			
Staff Travel			
Communications			
Rent/Lease			
Materials/Supplies			
Utilities			
Insurance/Bonding*			
Contractual Services			
Audit**			
Others (<i>list</i>):			
GRAND TOTAL			

* Note that General Liability Insurance (\$1 million); Automobile Liability Insurance, if appropriate; and Fidelity Bond (100% of contract amount) are usually required for all contractors. Costs for coverage should be included in this budget summary. If the agency does not already have this coverage, this is an eligible CDBG expense.

** All projects funded with CDBG funds must have an annual independent audit. Agencies with total annual federal or federally-derived funding of \$300,000 or more must have an annual A-133 audit. The cost of conducting this audit is an eligible CDBG expense.

- Include commitment letters specifically for this project from other funding sources as Attachment D (refer to page 15). If there are not sufficient funding commitments to ensure completion of the project the application may not be funded.
- Please describe the basis for the estimated budget (committed funds, past year fund raising success, etc.)

3. Based on the budget above, what is the cost per beneficiary for the project? (Refer to your answer to Section II, B (1) of this application for the anticipated number of beneficiaries, and explain how the cost per beneficiary was calculated.)

C. Budget Summary of Requested CDBG Project/Activity

	<u>FY 2015</u>	<u>%</u>	<u>FY 2016</u>	<u>%</u>	<u>FY 2017</u>	<u>%</u>
Amount requested from Fulton County CDBG Program:	\$_____	___	\$_____	___	\$_____	___
Amount Committed from other Sources (Attach Commitment Documentation as Attachment D):	\$_____	___	\$_____	___	\$_____	___
Amount requested from other Sources not yet committed (Excluding CDBG & Agency):	\$_____	___	\$_____	___	\$_____	___
Amount of Agency Contributions:	\$_____	___	\$_____	___	\$_____	___
TOTAL PROJECT COST:	\$_____	___	\$_____	___	\$_____	___

Section VI: Comprehensive Plan/ Mission/Compliance

*This section does not apply to **Fulton County Departments** applying for funding as the Community Development Division has direct access to the requested information.*

A. For all Municipal Applicants:

1. Is the proposed project consistent with the City's comprehensive plan?
☐ Yes ☐ No

Briefly explain how the proposed project is or is not consistent with the municipal comprehensive plan.

2. If the applying municipality has a Neighborhood Revitalization Strategy Area (NRSA) approved by HUD, is this project located within that NRSA?
☐ Yes ☐ No

3. If yes, is the project consistent with the Strategy?
☐ Yes ☐ No ☐ N/A

Briefly explain how the proposed project is or is not consistent with the Neighborhood Revitalization Strategy.

B. For Non-Profit Applicants:

1. Is the proposed project consistent with the Agency's Mission Statement?
☐ Yes ☐ No

Briefly explain how the proposed project is or is not consistent with the Agency's Mission Statement.

Section VII: Citizen Participation

*This section does not apply to **Fulton County Departments** applying for funding as the Community Development Division has direct access to the requested information.*

An important aspect of the CDBG Program is citizen participation. Each application must include documentation indicating that citizens of the community in which the project/service is located, have been informed of the project. This participation may be accomplished by conducting community meetings or public hearings where citizens are invited to comment on proposed projects. In addition, official notification must be conducted as follows:

A. For Municipalities:

The municipal council members must be notified at a public council meeting of the intent of the municipality to submit an application for funding. Adequate advance notice of the date of the meeting must be given to the public (in accordance with State of Georgia Open Meetings Act requirements). The following documentation of the notice and discussion of the meeting must be included in the application:

1. A copy of the public notice with date of publication;
2. The agenda for the meeting with project listed;
3. Minutes of the meeting where the application was discussed;
4. Optional; Newspaper clippings regarding the meeting at which the project was discussed; letters of support received by the municipality; and
5. A copy of the resolution from the City Council endorsing the submission of the project application; stating the project/service to be funded; the amount of the CDBG request in the application; and stating the amount to be contributed by the municipality for the project.

B. For Non-Profit Organizations:

Each application from a non-profit organization must contain a resolution from the organization's Board of Directors endorsing the submission of the application. The resolution must include the following:

1. A statement from the Board stating the project to be funded;
2. The amount of the CDBG funds requested in the application; and
3. A statement of the amount to be contributed by the organization.

Section VIII: CDBG Application Submission Requirements

The following items must be submitted with the CDBG application. Please ensure that *all* information is included as requested and labeled. Incomplete applications or applications that do not follow the prescribed format will not be considered for funding.

- ☐ One original and two copies of the entire application submission with original signatures, formatted and organized as required.
- ☐ **Attachment A:** Area benefit map indicating service area for CDBG funded activities
- ☐ **Attachment B:** Most recent financial audit. *Not applicable for Fulton County Departments applying for funding.*
- ☐ **Attachment C:** Endorsing Resolution (including citizen participation documentation for municipal applications). *Not applicable for Fulton County Departments applying for funding.*
- ☐ **Attachment D:** Commitment letters from other funding sources documenting other funds to be used for the project covered by the County's CDBG funds.
- ☐ **Attachment E:** An implementation and expenditure schedule for year 2015, 2016, and 2017 funding requests.

The following items are **also required for non-profit application submittals**. Please make sure all attachments are labeled. *Not applicable for Fulton County Departments applying for funding.*

- ☐ **Attachment F:** List of the active advisory council members or members of the agency's board of directors.
- ☐ **Attachment G:** Certificate of IRS 501(c) (3) tax exempt status.
- ☐ **Attachment H:** Articles of Incorporation and By-Laws.
- ☐ **Attachment J:** Organizational chart.
- ☐ **Attachment K:** Information documenting the agency's operating budget.
- ☐ **Attachment L:** Optional letters of community support for the project to be undertaken by the agency.

The following items should be submitted if applicable to your application. Please **only submit if appropriate**. Please label all attachments.

- ☐ Low/Mod income survey
- ☐ Topographical survey
- ☐ Deed/lease for premises
- ☐ Site plan/schematic design.
- ☐ Cost estimate for construction

CDBG 2015/ 2016/2017 Application Certification

I certify that the application submitted for Fulton County CDBG funds is accurate and complete to the best of my knowledge and belief. And if CDBG funds are awarded for the activities presented in this application, I will comply with the necessary certifications and assurances required by Fulton County and HUD.

Name of Organization

E-mail

Signature of Authorizing Official

Date

Name of Authorizing Official (please type)

Phone Number

Address

Fax Number

City/State/Zip

E-mail (contact person)

Conflict of Interest 24 CFR Part §570.611

(a) Applicability.

(i) In the procurement of supplies, equipment, construction, and services by recipients and by subrecipients, the conflict of interest provisions in 24 CFR 85.36 and 24 CFR 84.42, respectively, shall apply.

(ii) In all cases not governed by 24 CFR 85.36 and 84.42, the provisions of this section shall apply. Such cases include the acquisition and disposition of real property and the provision of assistance by the recipient or by its subrecipients to individuals, businesses, and other private entities under eligible activities that authorize such assistance (e.g., rehabilitation, preservation, and other improvements of private properties entities pursuant to 570.203, 570.204, 570.455, or 570.703(i)).

(b) Conflicts Prohibited. The general rule is that no persons described in paragraph (c) of this section who exercise or have exercised any functions or responsibilities with respect to CDBG activities assisted under this part, or who are in a position to participate in a decision making process or gain inside information with regard to such activities, may obtain a financial interest or benefit from a CDBG-assisted activity, or have a financial interest in any contract, subcontract, or agreement with respect to a CDBG-assisted activity, or with respect to the proceeds of the CDBG-assisted activity, either for themselves or those with whom they have business (Partner, share holder, or vested percentage) or immediate family ties (relatives such as first-cousins), during their tenure or for one year thereafter.

(c) Persons covered. The conflict of interest provisions of paragraph (b) of this section apply to any person who is an employee, agent, consultant, officer, or elected official or appointed official of the recipient (Fulton County), or any designated public agencies, or of subrecipients (recipients of Fulton County) that are receiving funds under this part.

(d) Exceptions. Upon the written request of the recipient, HUD may grant an exception to the provisions of paragraph (b) of this section on a case-by-case basis when it has satisfactorily met the threshold requirements of (d)(1) of this section, taking into account the cumulative effects of paragraph (d)(2) of this section.

- (1) Threshold requirements. HUD will consider an exception only after the recipient has provided the following documentation:
 - (i) A disclosure of the nature of the conflict, accompanied by an assurance that there has been public disclosure was made; and
 - (ii) An opinion of the recipient's attorney that the interest for which the exception is sought would not violate State or local law.
- (2) Factors to be considered for exceptions. In determining whether to grant a requested exception after the recipient has satisfactorily met the requirements of paragraph (d)(1) of this section, HUD shall conclude that such an exception will serve to further the purposes of the Act and the effective and efficient administration of the recipient's program or project, taking into account the cumulative effect of the following factors, as applicable:

Conflict of Interest 24 CFR Part §570.611

(Continued)

- (i) Whether the exception would provide a significant cost benefit or an essential degree of expertise to the program or project that would otherwise not be available;
- (ii) Whether an opportunity was provided for open competitive bidding or negotiation;
- (iii) Whether the person affected is a member of a group or class of low- or moderate-income persons intended to be the beneficiaries of the assisted activity, and the exception will permit such person to receive generally the same interests or benefits as are being made available or provided to the group or class;
- (iv) Whether the affected person has withdrawn from his or her functions or responsibilities, or the decision-making process with respect to the specific assisted activity in question;
- (v) Whether the interest or benefit was present before the affected person was in a position as described in paragraph (b) of this section;
- (vi) Whether undue hardship will result either to the recipient or the person affected when weighed against the public interest served by avoiding the prohibited conflict; and
- (vii) Any other relevant considerations.

NON CONFLICT OF INTEREST CERTIFICATION

I certify the applicant is complying with the conflict of interest provision of 24 CFR part 570.611.

The applicant hereby further understands and agrees that in the event that such conflict of interest is determined to exist, applicants' application may be rejected. The applicant may be required to return any CDBG funds previously awarded by Fulton County.

Applicant's Printed Name

Applicant's Signature

Date

The Fulton County Department of Housing and Community Development is committed to making the Community Development Block Grant Program application process effective and user friendly for applicants. Please utilize this page to provide your comments on the application form, the Program Manual and the technical assistance provided to you during the application process. Your comments will help us continue to improve our application process.

COMMENTS